

January 19, 2022

I write to urge you to vote ***against*** the proposed Vaccine Passport for Montgomery County, especially as applied to anyone under the age of 18. There are many reasons you should vote against this proposal, including:

- 1) Vaccine passports have not curbed Covid-19 transmission anywhere and will not do so here;
- 2) County government should not mandate health care choices for children – only their parents and pediatricians should make those decisions;
- 3) The passport will put undue burden on businesses; and
- 4) The passport is divisive and inequitable.

**First**, a vaccine passport is unnecessary given the high percentage of vaccination within the county and Maryland overall. According to the CDC, as of 1/18/2022, 90.6% of those 5 and older and 95% of those 12 and older in Montgomery County are fully vaccinated. Moreover, numerous residents have at least equivalent immunity from prior infections. Given the high percentage of vaccinations, natural immunity, and the milder nature of omicron, the county's hospitals have not been overwhelmed as demonstrated by the County Covid-19 data dashboard. Hospitalizations have not come close to overwhelming the system and have not exceeded either the rate of hospitalization during the winter/spring of 2020 or the Delta surge last winter.

Vaccine passports from cities who have adopted vaccine passports, like New York City, Chicago, Philadelphia and Los Angeles, have done **absolutely nothing to curb the current seasonal increase in cases**. As CDC Director Rochelle Walensky has admitted, ***vaccines cannot prevent transmission***. And as Anthony Fauci has acknowledged, omicron will "find just about everybody." The council should not impose its own views on what individuals should do with their health care decisions to cater to the irrational fears and anxiety of others or to give some misguided souls "peace of mind." Moreover, since vaccines protect the recipient of severe outcomes, then the vaccination status of anyone around them is irrelevant because they are protected.

**Second**, and most importantly, a vaccine passport will once again **disproportionately shift the burden to children who are at a significantly lower risk of having any serious adverse consequences to Covid 19**. Kids have lost years of schools and their childhoods. Now, a passport will keep many kids out of libraries, museums and other cultural, recreational, and sport venues that are critical to their development. The data are clear that aside from age, obesity is one of the highest risk factors for developing serious adverse consequences from Covid-19. A passport will prevent kids from playing basketball, going to gymnastics, fitness, and karate classes, and engaging in various other sports activities that are more critical than ever for their health.

Statements by Council Members, the County Executive and other County personnel have indicated that a goal of the passport proposal is to force vaccinations, particularly of children 5-11. But the County Executive and Council are not better qualified to make health care decisions for children than parents and pediatricians, and deciding whether to vaccinate a child between the ages of 5 and 18 is not an easy decision. **The FDA advisors** reviewing data and advising the FDA on the EUA for Pfizer's vaccine **expressed substantial concerns about an EUA serving as a justification for vaccine mandates for children given the substantial difference in risk to children from Covid-19 and the unknowns about the vaccine:**

- FDA adviser Dr. Oveta Fuller: "We cannot see the effects of COVID-19 so dramatically on children, and thus it raises the question: is it worth the risk? Giving parents the option to make that decision for themselves will be something we will be glad we were able to do."
- FDA adviser Dr. Michael Nelson: "Every vote here today is probably going to be caveated. I see this as an access and a personal choice and equity question and not a mandate for all of this age group. We should not underestimate the knowledge and decision making power of the public."
- In response to FDA advisor concerns about mandates, the FDA Center for Biologics Evaluation and Research Director Peter Marks "tried to reassure the committee members that in general US vaccine mandates have not been done while an indication was under emergency use authorization and some governors have already committed to not implementing mandates until a use is fully approved." <sup>1/</sup>

And yet, the county is now on the verge of adopting just such a mandate for children 5-16, for whom Covid-19 vaccines are ONLY authorized for emergency use. They are NOT fully approved by the FDA. The FDA's approval process is not a formality or merely a bureaucratic process - it involves a rigorous review and consideration of data to ensure that drugs we give to our children are safe and effective. The Covid-19 vaccines, and the use of boosters in healthy kids should not be politicized. It is reasonable for parents of young healthy children, for whom Covid-19 presents basically no serious risk, to wait for more safety data or full FDA approval prior to vaccinating their children. This is particularly true given the reported risks of myocarditis and other side effects of the vaccine. A search of VAERS database for adverse events reported prior to 12/24/2021 showed that for Covid 19 vaccines, for 6-17 year olds in Maryland there were 909 adverse events reported. Contrast that with 395 adverse events for flu vaccines and 468 for HPV vaccines – and that is counting all years, with both HPV and flu vaccines available for years longer than the Covid-19 vaccine. For this age group and period, there have been 135,880 adverse event reports for Covid-19 vaccines for the United States and its territories.

The Council has also expressed concern that while the vaccination rate in the county may be high, not enough people have received their boosters. But whether or not someone receives a booster should be a choice each individual makes in consultation with his or her own physician. Marion Gruber, Director of the FDA's Office of Vaccines Research & Review, and her deputy director, Phil Kraus, left decade long careers in the agency in protest over the Biden Administration's push to have healthy adults boosted. They published their concerns and views along with other scientists, in the Lancet, a prestigious, peer-reviewed medical journal. The question about whether or when a booster is appropriate for children should be left to the judgment of the child's parents and pediatrician. First, there are no boosters that even have an EUA authorization for ages 5-11. And for children 12 and older, there are substantial medical considerations, including higher incidents of myocarditis. Even physicians who have been passionate supporters of Covid-19 vaccines for children sometimes take a different position on boosters. For example, Dr. Paul Offit, the director of the Vaccine Education Center at Children's Hospital of Philadelphia, one of the preeminent children's hospitals in the nation, has said that "getting boosted would not be worth the risk for the average healthy 17-year old boy . . . [and] advised his own son, who is in his 20s, not to get a third dose. (<https://www.theatlantic.com/health/archive/2022/01/should-teens-get-booster-omicron/621222>).

And yet the Council is apparently considering not only mandating vaccines, but also giving the county health officer the unique authority to decide what "fully vaccinated" means, including adopting a

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<sup>1/</sup> See articles attached to the end of this testimony from the Pink Sheet, a non-partisan trade press journal covering the FDA.

different definition from the CDC. And while the CDC only makes recommendations or provides guidelines, the current proposal would impose the county health officer's opinion on a million residents' health care choices.

**Third**, a passport will impose a significant and undue burden on county businesses. Many businesses are already struggling as a result of staffing and supply chain issues and cannot afford to have a dedicated staff member checking passports at the door. Moreover, many businesses have spent years developing their brand and goodwill in the community, and a passport will effectively require them to reject a portion of their loyal customers, perhaps forever (notably, the proposal does not include any language for when the passport requirement would expire).

**Fourth**, in light of all of the data which demonstrates that a vaccine passport will do **nothing** to curb Covid-19 transmission or severe outcomes, the only possible reason to pass the passport is to punish and ostracize those who have made health care choices which the County Executive and Council do not approve. As history has shown us repeatedly, segregation is often done under the guise of "protecting the public" (e.g., Jim Crow laws and Japanese internment during WWII). We should respect the personal health decisions of those who have chosen not to vaccinate themselves or their children, and not exclude them from important aspects of public life. The damage done by the institution of a vaccine passport will be much more substantial and long-lasting to the county's youngest residents, to the county's businesses, and to the legitimacy of the County Executive and Council Members.

I urge you to reject the vaccine passport in its entirety, which is the only result consistent with the county vision statement to build a "a more equitable and inclusive" county. At a minimum, the vaccine passport should not be applicable to anyone under 18, and as an alternative to vaccination, it should recognize natural immunity from prior infection.

Eliza Andonova  
Silver Spring

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